

**Three Standard Massachusetts Medigap Plans:**  
**Available in Massachusetts**  
**for Coverage Beginning on or After January 1, 1995**

<b>Standard Benefits</b>	<b>MEDICARE SUPPLEMENT CORE</b>	<b>MEDICARE SUPPLEMENT 1</b>	<b>MEDICARE SUPPLEMENT 2</b>
Basic Benefits: <ul style="list-style-type: none"> <li>• Part A Hospital Coinsurance</li> <li>• 365 Lifetime Hospital Days</li> <li>• First three pints of blood each year</li> <li>• Part B Medical Coinsurance (generally 20% for all approved services)</li> </ul>	X	X	X
Coverage in addition to Medicare for inpatient days in licensed mental health hospitals	60 Days per calendar year less Medicare or plan days	120 Days per benefit period less Medicare or plan days	120 Days per benefit period less Medicare or plan days
Skilled Nursing Facility Coinsurance (Days 21-100)		X	X
Part A Deductible		X	X
Part B Deductible		X	X
Foreign Travel		X	X
Outpatient Prescription Drugs Purchased at Retail Pharmacies: \$35 calendar quarter deductible-- Generic drugs: 100% Brand-name drugs: 80%			X